| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
|  |  |  |  |
| FEE DETERMINATION |  |  |  |
| O.I.P.E. CLASSIFIER | RSD |  | 5/17/01 |
| FORMALITY REVIEW | MH | 920 | 06-18-01 |
| RESPONSE FORMALITY REVIEW |  | 1091 | 8-22-01 |
|  |  |  |  |

## INDEX OF CLAIMS

✔ ................................. Rejected
= ................................. Allowed
— (Through numeral)... Canceled
÷ ................................. Restricted

N ................................. Non-elected
I ................................. Interference
A ................................. Appeal
O ................................. Objected

Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)